

Utah Health Status Update: Health Plan Enrollee Satisfaction, 1996

July 1997

Utah Department of Health

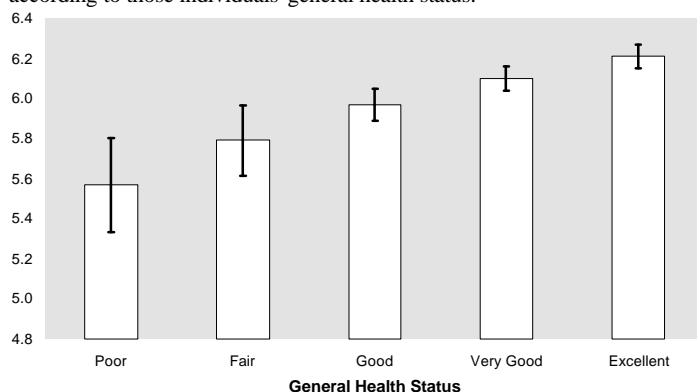
An important measure of the health care system's performance is how satisfied individual consumers are with their health plans and the care they receive. The Utah Health Data Committee, in partnership with the Division of Health Care Financing (Medicaid) and five Health Maintenance Organizations (HMO), conducted a telephone survey of over 4,000 Medicaid and non-Medicaid enrollees between July and October 1996. Enrollees were surveyed about aspects of their HMO plan and the health care they received.

Highlights

- Four out of five Utahns surveyed were very or completely satisfied with their health plan.
- Enrollees who reported their health status as "very good" or "excellent" are generally more satisfied with their HMO plan and the care they receive.
- In general, Medicaid clients are more satisfied with their HMO plan than non-Medicaid enrollees, despite having lower reported health status.
- Whether enrollees would recommend their HMO plan to family members and friends is strongly influenced by their satisfaction with the medical care they have received.
- Aspects of care that contributed most to overall enrollee satisfaction were:
 - √ Overall quality of care and medical services
 - √ Range of services covered by the plan
 - √ Number of doctors enrollees have to choose from
 - √ How well medical care meets enrollees' needs
- People who have more experience using their health plan (either longer duration of enrollment or greater utilization of services) tend to be less satisfied with their plan.

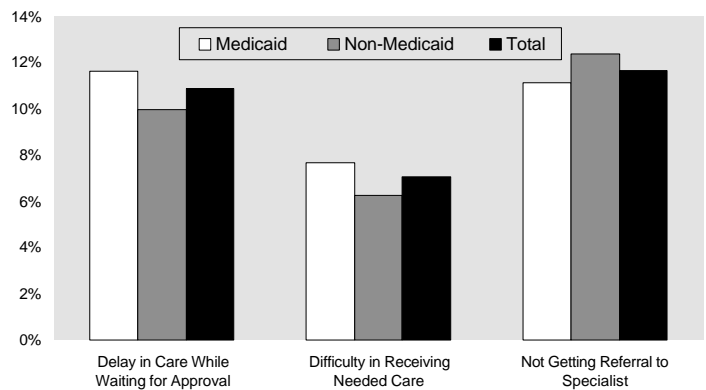
Overall Satisfaction

Mean score indicating consumers overall satisfaction with their HMO according to those individuals' general health status.



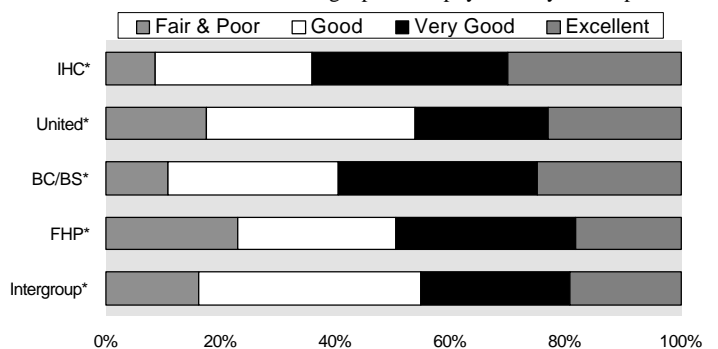
Access to Care

Percentage of respondents reporting problems with access to care, according to plan type and type of problem.



Ease of Choosing a Personal Physician

Percentage of respondents in non-Medicaid HMOs reporting different levels of satisfaction with ease of choosing a personal physician by health plan.



* Health Plans:

IHC = IHC Care, IHC Health Plans

United = United HealthCare of Utah

BC/BS = Healthwise, Blue Cross/Blue Shield of Utah

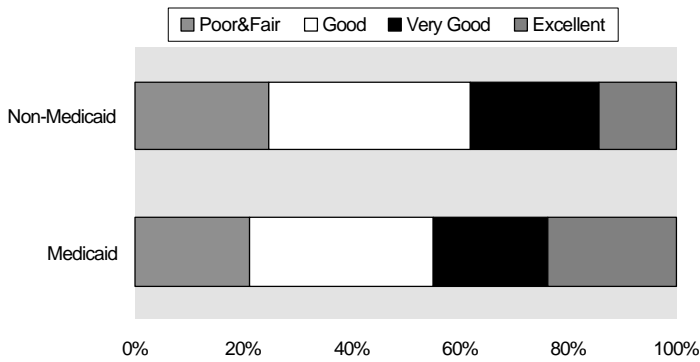
FHP = FHP/PacifiCare of Utah

Intergroup = Intergroup of Utah

The commercial plans surveyed represent 68% of the commercial HMO market in Utah.

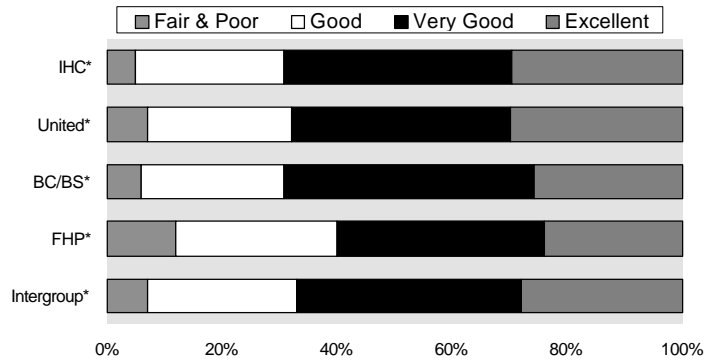
Access to Services

Percentage of respondents in Medicaid and non-Medicaid HMOs reporting different level of satisfaction with access to services during evenings, nights, and weekends.



Medical Care

Percentage of respondents in non-Medicaid HMOs reporting different levels of satisfaction with how well that plan's medical care has met their needs.



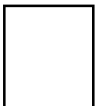
The data for this

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came from the recently released report, *1996 HMO Satisfaction Survey Summary Report: A Comparison of Respondents and Responses Between Medicaid and Commercial HMO Enrollees* and from other unpublished results of the survey. This report describes the survey and its limitations. The complete report is available on the Internet at <http://hlunix.hl.state.ut.us/hda> and copies can be obtained from the Office of Health Data Analysis (801) 538-7048 or email: hlhda.dlove@state.ut.us.



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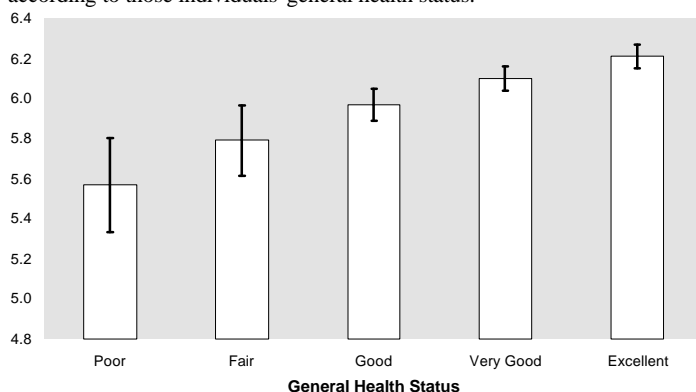
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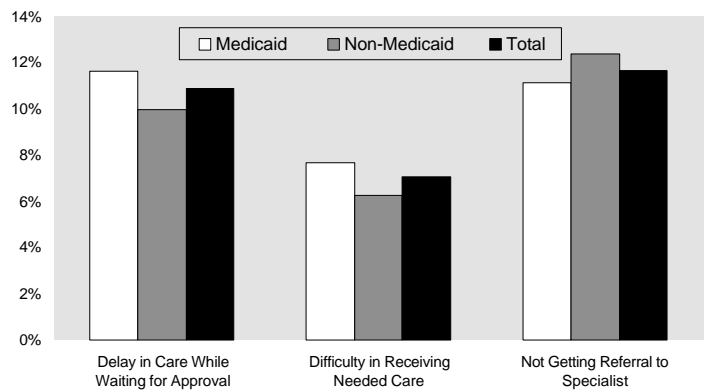
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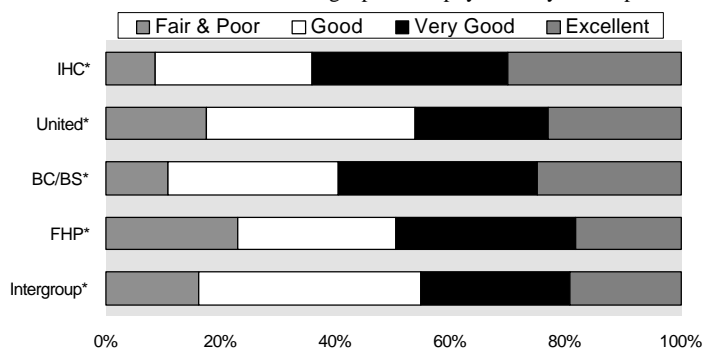
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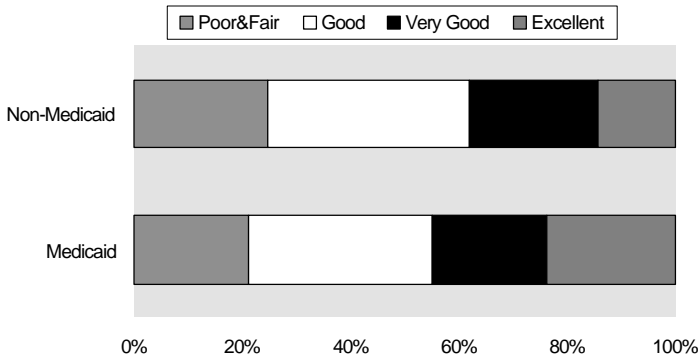
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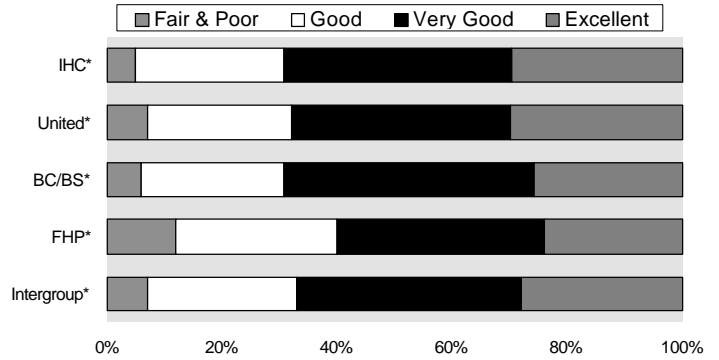
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